Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

		CLAIMS A	S FILED -	PART	l		!	SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)			TYPE		OR			
TOTAL CLAIMS			~O					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			€ V _{minus 20=}		*			X\$ 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	minus 3 =		*			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESEN					·			+145=		OR	+290=		
* If the difference in column 1 is less than zero, er					"0" in c	olumn 2		TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PAR									<u>L.</u>	1	OTHER	THAN	
		(Column 1)		(Colur		(Column 3)	_	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		-		X43=		OR	X86=	-	
	FIRST PRESE	ENTATION OF MI	JUIPLE DEI	PENDENI	CLAIM] [+145=		OR	+290=		
							L	TOTAL		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colun	nn 2)	(Column 3)		ADDIT. FEE			ADDII. FEE (
AMENDMENT B		CLAIMS REMAINING AFTER		HIGH NUMI PREVIC	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	AMENDMENT .	Minus	PAID	FUR	=	1	X\$ 9=	FEE	OR	X\$18=	FEE	
MEN	Independent	*	Minus	***		=	1 H	X43=			X86=		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM]	A43=	,	OR			
•								+145=	•	OR	+290 [÷]		
							•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colun		(Column 3)	•					P.	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT .						┚┟	1145-	,		+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	TOTAL		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	ADDIT. FEE		
		nber Previously Paid					er four	nd in the app	ropriate box	in col	umn 1.		